

Facsimile Transmission Form

To:

RECEIVED
CENTRAL FAX CENTER

FEB 17 2005

From:

Message: fax

PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/849,793
	Confirmation No.	1989
	Filing Date	May 4, 2001
	First Named Inventor	Shyh-Mei F. Ho
	Art Unit	2126
	Title: CICS BMS (Basic Message Service) Metamodel	

Please change the Correspondence Address for the above-identified application to:

☒ Customer Number

29141

Type Customer Number here

RECEIVED
CENTRAL FAX CENTER
FEB 17 2005

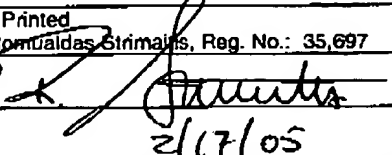
OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		ZIP
Country				
Telephone		Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name: Romualdas Strimaitis, Reg. No.: 35,697
Signature: 
Date: 2/17/05
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.
<input type="checkbox"/> Total of 3 forms are submitted.

Attorney Docket No: SVL920010041US1